

## Testimony for Public Hearing Labor and Public Employees Committee Thursday, March 8<sup>th</sup>, 2018

Valerie Horsley 136 Millpond Road Hamden, CT 06514

Re: S.B. 1 and H.B. 5387: Paid Family Medical Leave Re: H.B. 5386: Pay Equity

Good afternoon Labor and Public Employee Committee Members. My name is <u>Valerie Horsley</u> from Hamden, and a professor at Yale University. I am the co-founder of grassroots organization, Action Together Connecticut and a candidate for State Senate District 17. I am not testifying on behalf of Yale but as a citizen.

I am in support these bills of the following reasons:

## 1. Paid Family Leave:

- When I had my daughter in NY as a postdoctoral fellow, my leave was covered by NY State Disability. However, CT
  postdoctoral fellows do not have the same guarantee. I was fortunate that my daughter that was born here was able to be
  covered by my employer but others are not so lucky.
- Clinical faculty experience what is called **clinical compression** which is when their clinical duties that they miss during (often short) family leaves have to be "made up" when they return to work. This practice pressures their colleagues to work extra without extra compensation and for clinicians to return to work quickly after their children are born. This particularly impacts women clinicians who are often still recovering from childbirth and sleep deprived with a newborn at home. This situation is not ideal for patients or for parents that are doctors.
- Yale Medical School now overs "Package Relief" that includes PAID full-time off for eight weeks to ameliorate this problem. See policy here: http://medicine.yale.edu/facultyaffairs/policies/childrearing.aspx

## 2. Pay equity

Unlike government and public university employees, private companies and universities do not necessarily publish salary information on their employees. I do not know whether I get paid less than my male colleagues. Recently, studies at the medical school at Yale showed that women were making less than their male counterparts. To combat this problem, each employee now receives information annually about where their salary sits in the range of salaries in their departments for a similar job. In 2016, salary adjustments were made 4% of male and 11% of female clinical faculty.

These examples speak to the continued problem of pay inequality and the need for paid family leave in CT.

I hope that this legislation will force employers in CT to be more equitable in their salaries and lessen the burden of each individual to make sure they have a fare wage.

Thank you for time and consideration.

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Sincerely,

Valerie Horsley, PhD

Action Together CT, Leader; New Haven County Chapter

Associate Professor-- Yale University